BEFORE THE BOARD OF REGISTERED NURSING DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

2006-2

	Case No.
JULIE ANN MESSMER PREDISIK	
STRETZ aka IIII IE A STRETZ	

STRETZ, aka JULIE A. STRETZ 701 Ocean Avenue, #2 Seal Beach, CA 90740

Registered Nurse License No. 234178

In the Matter of the Accusation Against:

Respondent

DECISION AND ORDER

The attached Stipulated Settlement and Disciplinary Order is hereby adopted by the Board of Registered Nursing, Department of Consumer Affairs, as it's Decision in the above entitled matter.

This Decision shall become effective on ___July 17, 2006 __.

IT IS SO ORDERED June 16, 2006.

President

Board of Registered Nursing Department of Consumer Affairs

State of California

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1	BILL LOCKYER, Attorney General of the State of California SHERRY L. LEDAKIS, State Bar No. 131767 Deputy Attorney General California Department of Justice		
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5	P.O. Box 85266		
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7	Facsimile: (619) 645-2061		
8	Attorneys for Complainant		
9	BEFORE THE BOARD OF REGISTERED NURSING DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA		
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11			
12	In the Matter of the Accusation Against:	Case No. 2006-2	
13	JULIE ANN MESSMER PREDISIK STRETZ,	OAH No. 2005100097	
14	A.K.A. JULIE A. STRETZ 701 Ocean Avenue, #2	STIPULATED SETTLEMENT AND	
15	Seal Beach, CA 90740	DISCIPLINARY ORDER	
16	Registered Nurse License No. 234178		
17	Respondent.		
18		,	
19	IT IS HEREBY STIPULATED AND	AGREED by and between the parties to the	
20	above-entitled proceedings that the following matters are true:		
21	<u>PARTIES</u>		
22	1. Ruth Ann Terry, M.P.H., R.N., Complainant, is the Executive Officer of		
23	the Board of Registered Nursing. Ms. Terry brought this action solely in her official capacity and		
24	is represented in this matter by Bill Lockyer, Attorney General of the State of California, by		
25	Sherry L. Ledakis, Deputy Attorney General.		
26	2. Respondent Julie Ann Messmer Predisik Stretz, a.k.a. Julie A. Stretz,		
27	Respondent, is represented in this proceeding by attorney Donald B. Brown, Law Offices of		
28	Brown & Brown, whose address is 3848 Carson Stre	eet, Suite 206, Torrance, CA 90503	

3. On or about July 31, 1973, the Board of Registered Nursing issued Registered Nurse License No. 234178 to Julie Ann Messmer Predisik Stretz, a.k.a. Julie A. Stretz. The License was in full force and effect at all times relevant to the charges brought in Accusation No. 2006-2 and will expire on August 31, 2007, unless renewed.

JURISDICTION

4. Accusation No. 2006-2 was filed before the Board of Registered Nursing, Board, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on August 3, 2005. Respondent timely filed her Notice of Defense contesting the Accusation. A copy of Accusation No. 2006-2 is attached as exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

- 5. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 2006-2. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.
- 6. Respondent is fully aware of her legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to be represented by counsel at her own expense; the right to confront and cross-examine the witnesses against her; the right to present evidence and to testify on her own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.
- 7. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

CULPABILITY

8. Respondent admits the truth of each and every charge and allegation in Accusation No. 2006-2.

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9. Respondent agrees that her Registered Nurse License is subject to discipline and she agrees to be bound by the Board's imposition of discipline as set forth in the Disciplinary Order below.

RESERVATION

10. The admissions made by Respondent herein are only for the purposes of this proceeding, or any other proceedings in which the Board or other professional licensing agency is involved, and shall not be admissible in any other criminal or civil proceeding.

CONTINGENCY

- 11. The parties understand and agree that facsimile copies of this Stipulated Settlement and Disciplinary Order, including facsimile signatures thereto, shall have the same force and effect as the originals.
- 12. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or formal proceeding, issue and enter the following Disciplinary Order:

DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Registered Nurse License No. 234178 issued to Respondent Julie Ann Messmer Predisik Stretz, a.k.a. Julie A. Stretz, Respondent, is revoked. However, the revocation is stayed and Respondent is placed on probation for three (3) years on the following terms and conditions.

Severability Clause. Each condition of probation contained herein is a separate and distinct condition. If any condition of this Order, or any application thereof, is declared unenforceable in whole, in part, or to any extent, the remainder of this Order, and all other applications thereof, shall not be affected. Each condition of this Order shall separately be valid and enforceable to the fullest extent permitted by law.

1. Obey All Laws. Respondent shall obey all federal, state and local laws. A full and detailed account of any and all violations of law shall be reported by Respondent to the Board in writing within seventy-two (72) hours of occurrence. To permit monitoring of compliance with this condition, Respondent shall submit completed fingerprint forms and

 fingerprint fees within 45 days of the effective date of the decision, unless previously submitted as part of the licensure application process.

Criminal Court Orders: If Respondent is under criminal court orders, including probation or parole, and the order is violated, this shall be deemed a violation of these probation conditions, and may result in the filing of an accusation and/or petition to revoke probation.

2. Comply with the Board's Probation Program. Respondent shall fully comply with the conditions of the Probation Program established by the Board and cooperate with representatives of the Board in its monitoring and investigation of the Respondent's compliance with the Board's Probation Program. Respondent shall inform the Board in writing within no more than 15 days of any address change and shall at all times maintain an active, current license status with the Board, including during any period of suspension.

Upon successful completion of probation, Respondent's license shall be fully restored.

- 3. **Report in Person.** Respondent, during the period of probation, shall appear in person at interviews/meetings as directed by the Board or its designated representatives.
- 4. Residency, Practice, or Licensure Outside of State. Periods of residency or practice as a registered nurse outside of California shall not apply toward a reduction of this probation time period. Respondent's probation is tolled, if and when she resides outside of California. Respondent must provide written notice to the Board within 15 days of any change of residency or practice outside the state, and within 30 days prior to re-establishing residency or returning to practice in this state.

Respondent shall provide a list of all states and territories where she has ever been licensed as a registered nurse, vocational nurse, or practical nurse. Respondent shall further provide information regarding the status of each license and any changes in such license status during the term of probation. Respondent shall inform the Board if she applies for or obtains a new nursing license during the term of probation.

5. Submit Written Reports. Respondent, during the period of probation, shall submit or cause to be submitted such written reports/declarations and verification of actions under penalty of perjury, as required by the Board. These reports/declarations shall contain statements relative to Respondent's compliance with all the conditions of the Board's Probation Program. Respondent shall immediately execute all release of information forms as may be required by the Board or its representatives.

Respondent shall provide a copy of this Decision to the nursing regulatory agency in every state and territory in which she has a registered nurse license.

6. Function as a Registered Nurse. Respondent, during the period of probation, shall engage in the practice of registered nursing in California for a minimum of 24 hours per week for 6 consecutive months or as determined by the Board.

For purposes of compliance with the section, "engage in the practice of registered nursing" may include, when approved by the Board, volunteer work as a registered nurse, or work in any non-direct patient care position that requires licensure as a registered nurse.

The Board may require that advanced practice nurses engage in advanced practice nursing for a minimum of 24 hours per week for 6 consecutive months or as determined by the Board.

If Respondent has not complied with this condition during the probationary term, and Respondent has presented sufficient documentation of her good faith efforts to comply with this condition, and if no other conditions have been violated, the Board, in its discretion, may grant an extension of Respondent's probation period up to one year without further hearing in order to comply with this condition. During the one year extension, all original conditions of probation shall apply.

7. Employment Approval and Reporting Requirements. Respondent shall obtain prior approval from the Board before commencing or continuing any employment, paid or voluntary, as a registered nurse. Respondent shall cause to be submitted to the Board all performance evaluations and other employment related reports as a registered nurse upon request of the Board.

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- · Respondent shall provide a copy of this Decision to her employer and immediate supervisors at Maxim Health Care Registry and at Coast Community Hospital, prior to commencement of any nursing or other health care related employment.

In addition to the above, Respondent shall notify the Board in writing within seventy-two (72) hours after she obtains any nursing or other health care related employment. Respondent shall notify the Board in writing within seventy-two (72) hours after she is terminated or separated, regardless of cause, from any nursing, or other health care related employment with a full explanation of the circumstances surrounding the termination or separation.

8. Supervision. Respondent shall obtain prior approval from the Board regarding Respondent's level of supervision and/or collaboration before commencing or continuing any employment as a registered nurse, or education and training that includes patient care.

Respondent shall practice only under the direct supervision of a registered nurse, in good standing (no current discipline) with the Board of Registered Nursing, at Coastal Community Hospital in the Department of Emergency Services, unless alternative methods of supervision and/or collaboration (e.g., with an advanced practice nurse or physician) are approved.

Respondent's level of supervision and/or collaboration may include, but is not limited to the following:

- (a) Maximum The individual providing supervision and/or collaboration is present in the patient care area or in any other work setting at all times.
- (b) Moderate The individual providing supervision and/or collaboration is in the patient care unit or in any other work setting at least half the hours Respondent works.
- (c) Minimum The individual providing supervision and/or collaboration has person-to-person communication with Respondent at least twice during each shift worked.
- (d) Home Health Care If Respondent is approved to work in the home health care setting, the individual providing supervision and/or collaboration shall have person-to-

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person communication with Respondent as required by the Board each work day. Respondent shall maintain telephone or other telecommunication contact with the individual providing supervision and/or collaboration as required by the Board during each work day. The individual providing supervision and/or collaboration shall conduct, as required by the Board, periodic, on-site visits to patients' homes visited by Respondent with or without Respondent present.

9. **Employment Limitations.** Respondent shall work through the Maxim Health Care Registry where she is currently employed, and through that registry she will work solely at Coastal Community Hospital located at 2701 South Bristol Street, Santa Ana, CA 92704, telephone number (714) 754-5454, x 5550 and only in the Department of Emergency Services. Respondent shall not work for any other registry or any other placement through that registry. Respondent's employment at any location other than at Coastal Community Hospital, Department of Emergency Services, shall constitute a violation of probation.

Respondent shall not work for a licensed home health agency as a visiting nurse unless the registered nursing supervision and other protections for home visits have been approved by the Board. Respondent shall not work in any other registered nursing occupation where home visits are required.

Respondent shall not work in any health care setting as a supervisor of registered nurses. The Board may additionally restrict Respondent from supervising licensed vocational nurses and/or unlicensed assistive personnel on a case-by-case basis.

Respondent shall not work as a faculty member in an approved school of nursing or as an instructor in a Board approved continuing education program.

Respondent shall work only on a regularly assigned, identified and predetermined worksite(s) and shall not work in a float capacity.

If Respondent is working or intends to work in excess of 40 hours per week, the Board may request documentation to determine whether there should be restrictions on the hours of work.

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10. Complete a Nursing Course(s). Respondent, at her own expense, shall enroll and successfully complete a course(s) relevant to the practice of registered nursing no later than six months prior to the end of her probationary term.

Respondent shall obtain prior approval from the Board before enrolling in the course(s). Respondent shall submit to the Board the original transcripts or certificates of completion for the above required course(s). The Board shall return the original documents to Respondent after photocopying them for its records.

11. Cost Recovery. Respondent shall pay to the Board costs associated with its investigation and enforcement pursuant to Business and Professions Code section 125.3 in the amount of \$9,000.00. Respondent shall be permitted to pay these costs in a payment plan approved by the Board, with payments to be completed no later than three months prior to the end of the probation term.

If Respondent has not complied with this condition during the probationary term, and Respondent has presented sufficient documentation of her good faith efforts to comply with this condition, and if no other conditions have been violated, the Board, in its discretion, may grant an extension of Respondent's probation period up to one year without further hearing in order to comply with this condition. During the one year extension, all original conditions of probation will apply.

12. Violation of Probation. If Respondent violates the conditions of her probation, the Board after giving Respondent notice and an opportunity to be heard, may set aside the stay order and impose the stayed discipline (revocation/suspension) of Respondent's license.

If during the period of probation, an accusation or petition to revoke probation has been filed against Respondent's license or the Attorney General's Office has been requested to prepare an accusation or petition to revoke probation against Respondent's license, the probationary period shall automatically be extended and shall not expire until the accusation or petition has been acted upon by the Board.

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13. License Surrender. During Respondent's term of probation, if she ceases practicing due to retirement, health reasons or is otherwise unable to satisfy the conditions of probation, Respondent may surrender her license to the Board. The Board reserves the right to evaluate Respondent's request and to exercise its discretion whether to grant the request, or to take any other action deemed appropriate and reasonable under the circumstances, without further hearing. Upon formal acceptance of the tendered license and wall certificate, Respondent will no longer be subject to the conditions of probation.

Surrender of Respondent's license shall be considered a disciplinary action and shall become a part of Respondent's license history with the Board. A registered nurse whose license has been surrendered may petition the Board for reinstatement no sooner than the following minimum periods from the effective date of the disciplinary decision:

- (1) Two years for reinstatement of a license that was surrendered for any reason other than a mental or physical illness; or
 - (2) One year for a license surrendered for a mental or physical illness.
- Decision, Respondent, at her expense, shall have a licensed physician, nurse practitioner, or physician assistant, who is approved by the Board before the assessment is performed, submit an assessment of the Respondent's physical condition and capability to perform the duties of a registered nurse. Such an assessment shall be submitted in a format acceptable to the Board. If medically determined, a recommended treatment program will be instituted and followed by the Respondent with the physician, nurse practitioner, or physician assistant providing written reports to the Board on forms provided by the Board.

If Respondent is determined to be unable to practice safely as a registered nurse, the licensed physician, nurse practitioner, or physician assistant making this determination shall immediately notify the Board and Respondent by telephone, and the Board shall request that the Attorney General's office prepare an accusation or petition to revoke probation. Respondent shall immediately cease practice and shall not resume practice until notified by the Board. During this period of suspension, Respondent shall not engage in any practice for which a license

issued by the Board is required until the Board has notified Respondent that a medical determination permits Respondent to resume practice. This period of suspension will not apply to the reduction of this probationary time period.

If Respondent fails to have the above assessment submitted to the Board within the 45-day requirement, Respondent shall immediately cease practice and shall not resume practice until notified by the Board. This period of suspension will not apply to the reduction of this probationary time period. The Board may waive or postpone this suspension only if significant, documented evidence of mitigation is provided. Such evidence must establish good faith efforts by Respondent to obtain the assessment, and a specific date for compliance must be provided. Only one such waiver or extension may be permitted.

Dependence. spondent, at her expense, shall successfully complete during the probationary period or shall have successfully completed prior to commencement of probation a Board-approved treatment/rehabilitation program of at least six months duration. As required, reports shall be submitted by the program on forms provided by the Board. If Respondent has not completed a Board-approved treatment/rehabilitation program prior to commencement of probation, Respondent, within 45 days from the effective date of the decision, shall be enrolled in a program. If a program is not successfully completed within the first nine months of probation, the Board shall consider Respondent in violation of probation.

Based on Board recommendation, each week Respondent shall be required to attend at least one, but no more than five 12-step recovery meetings or equivalent (e.g., Narcotics Anonymous, Alcoholics Anonymous, etc.) and a nurse support group as approved and directed by the Board. If a nurse support group is not available, an additional 12-step meeting or equivalent shall be added. Respondent shall submit dated and signed documentation confirming such attendance to the Board during the entire period of probation. Respondent shall continue with the recovery plan recommended by the treatment/rehabilitation program or a licensed mental health examiner and/or other ongoing recovery groups.

shall completely abstain from the possession, injection or consumption by any route of all controlled substances and all psychotropic (mood altering) drugs, including alcohol, except when the same are ordered by a health care professional legally authorized to do so as part of documented medical treatment. Respondent shall have sent to the Board, in writing and within fourteen (14) days, by the prescribing health professional, a report identifying the medication, dosage, the date the medication was prescribed, the Respondent's prognosis, the date the medication will no longer be required, and the effect on the recovery plan, if appropriate.

Respondent shall identify for the Board a single physician, nurse practitioner or physician assistant who shall be aware of Respondent's history of substance abuse and will coordinate and monitor any prescriptions for Respondent for dangerous drugs, controlled substances or morRealtering drugs. The coordinating physician, nurse practitioner, or physician assistant shall report to the Board on a quarterly basis Respondent's compliance with this condition. If any substances considered addictive have been prescribed, the report shall identify a program for the time limited use of any such substances.

The Board may require the single coordinating physician, nurse practitioner, or physician assistant to be a specialist in addictive medicine, or to consult with a specialist in addictive medicine.

participate in a random, biological fluid testing or a drug screening program which the Board approves. The length of time and frequency will be subject to approval by the Board. Respondent is responsible for keeping the Board informed of Respondent's current telephone number at all times. Respondent shall also ensure that messages may be left at the telephone number when she is not available and ensure that reports are submitted directly by the testing agency to the Board, as directed. Any confirmed positive finding shall be reported immediately to the Board by the program and Respondent shall be considered in violation of probation.

In addition, Respondent, at any time during the period of probation, shall fully cooperate with the Board or any of its representatives, and shall, when requested, submit to such

tests and samples as the Board or its representatives may require for the detection of alcohol, narcotics, hypnotics, dangerous drugs, or other controlled substances.

If Respondent has a positive drug screen for any substance not legally authorized and not reported to the coordinating physician, nurse practitioner, or physician assistant, and the Board files a petition to revoke probation or an accusation, the Board may suspend Respondent from practice pending the final decision on the petition to revoke probation or the accusation. This period of suspension will not apply to the reduction of this probationary time period.

If Respondent fails to participate in a random, biological fluid testing or drug screening program within the specified time frame, Respondent shall immediately cease practice and shall not resume practice until notified by the Board. After taking into account documented evidence of mitigation, if the Board files a petition to revoke probation or an accusation, the Board may suspend Respondent from practice pending the final decision on the petition to revoke probation or the accusation. This period of suspension will not apply to the reduction of this probationary time period.

18. Mental Health Examination. Respondent shall, within 45 days of the effective date of this Decision, have a mental health examination including psychological testing as appropriate to determine her capability to perform the duties of a registered nurse. The examination will be performed by a psychiatrist, psychologist or other licensed mental health practitioner approved by the Board. The examining mental health practitioner will submit a written report of that assessment and recommendations to the Board. All costs are the responsibility of Respondent. Recommendations for treatment, therapy or counseling made as a result of the mental health examination will be instituted and followed by Respondent.

If Respondent is determined to be unable to practice safely as a registered nurse, the licensed mental health care practitioner making this determination shall immediately notify the Board and Respondent by telephone, and the Board shall request that the Attorney General's office prepare an accusation or petition to revoke probation. Respondent shall immediately cease practice and may not resume practice until notified by the Board. During this period of suspension, Respondent shall not engage in any practice for which a license issued by the Board

is required, until the Board has notified Respondent that a mental health determination permits Respondent to resume practice. This period of suspension will not apply to the reduction of this probationary time period.

If Respondent fails to have the above assessment submitted to the Board within the 45-day requirement, Respondent shall immediately cease practice and shall not resume practice until notified by the Board. This period of suspension will not apply to the reduction of this probationary time period. The Board may waive or postpone this suspension only if significant, documented evidence of mitigation is provided. Such evidence must establish good faith efforts by Respondent to obtain the assessment, and a specific date for compliance must be provided. Only one such waiver or extension may be permitted.

19. THERAPY OR COUNSELING PROGRAM - Respondent, at his/her expense, shall participate in an on-going counseling program until such time as the Board releases him/her from this requirement and only upon the recommendation of the counselor. Written progress reports from the counselor will be required at various intervals.

ACCEPTANCE

I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully discussed it with my attorney, Donald B. Brown. I understand the stipulation and the effect it will have on my Registered Nurse License. I enter into this Stipulated Settlement and

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1	Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the			
2	Decision and Order of the Board.			
3	DATED: 4-5-06			
4				
5	WWW. AND			
6	JULIE/ANN MESSMER PREDISIK STRETZ, A.K.A. JULIE A. STRETZ (Respondent)			
7	Respondent			
8				
9	I have read and fully discovered with Decreased to the Assact Table Assact Table			
10	I have read and fully discussed with Respondent Julie Ann Messmer Predisik			
11.	Stretz, a.k.a. Julie A. Stretz the terms and conditions and other matters contained in the above			
12	Stipulated Settlement and Disciplinary Order. I approve its form and content. MAR 2 7 2006 DATED:			
13	DATED:			
14				
15	DONALD B. BROWN			
16	Attorney for Respondent			
17	<u>ENDORSEMENT</u>			
18	The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully			
19	submitted for consideration by the Board of Registered Nursing.			
20	40)			
21	(41) DATED: 4/17/06			
22	BILL LOCKYER, Attorney General			
23	of the State of California			
24	Shorry Ledakis			
25	SHERRY L. LEDAKIS			
26	Deputy Attorney General			
27	Attorneys for Complainant			
28				

DOJ Matter ID: SD2004800207 70052960.wpd

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Exhibit A Accusation No. 2006-2

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3	Lead Supervising Deputy Attorney General California Department of Justice 110 West "A" Street, Suite 1100		
4	4 San Diego, CA 92101		
5	5 P.O. Box 85266 San Diego, CA 92186-5266		
6		•	
7	7 Attorneys for Complainant		
8	8		
9	BOARD OF REGISTERED NURSING		
10	DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA		
11			
12	of the first of th	Case No. 2006-2	
13	STRETZ,	CCUSATION	
14	701 Ocean Avenue #2	·	
15	Registered Nurse License No. 234178		
16 17	Respondent.		
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19	a de la complantant unogos.		
ļ	AKTIES		
20	orings this Accusation		
21	solely in her official capacity as the Executive Officer of the Board of Registered Nursing,		
22			
23	2. On or about July 31, 1973, the Board of Registered Nursing ("Board")		
24	issued Registered Nurse License Number 234178 to Julie Ann Messmer Predisik Stretz, also		
25	known as Julie A. Stretz ("Respondent"). Respondent's license will expire on August 31, 2007.		
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following:

STATUTORY PROVISIONS

- 3. Section 2750 of the Business and Professions Code ("Code") provides that the Board may discipline any licensee, including a licensee holding a temporary or an inactive license, for any reason provided in Article 3 (commencing with section 2750 of the Code) of the Nursing Practice Act.
 - 4. Section 2761 of the Code provides, in pertinent part:

"The board may take disciplinary action against a certified or licensed nurse or deny an application for a certificate or license for any of the following:

(a) Unprofessional conduct, which includes, but is not limited to, the

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- (1) Incompetence, or gross negligence in carrying out usual certified or licensed nursing functions."
 - 5. Section 2762 of the Code provides, in pertinent part:

"In addition to other acts constituting unprofessional conduct within the meaning of this chapter [the Nursing Practice Act], it is unprofessional conduct for a person licensed under this chapter to do any of the following:

- (a) Obtain or possess in violation of law, or prescribe, or except as directed by a licensed physician and surgeon, dentist, or podiatrist administer to himself or herself, or furnish or administer to another, any controlled substance as defined in Division 10 (commencing with Section 11000) of the Health and Safety Code or any dangerous drug or dangerous device as defined in Section 4022.
- (e) Falsify, or make grossly incorrect, grossly inconsistent, or unintelligible entries in any hospital, patient, or other record pertaining to the substances described in subdivision (a) of this section."
 - 6. Health and Safety Code section 11171 provides:

"No person shall prescribe, administer, or furnish a controlled substance except under the conditions and in the manner provided by this division."

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12. "Vicodin" is a compound consisting of 500mg. of acetaminophen per tablet and 5mg. of hydrocodone bitartrate, also known as dihydrocodeinone, a Schedule III controlled substance as designated by Health and Safety Code section 11056, subdivision (e)(4), and a dangerous drug within the meaning of section 4022 of the Code.

13. "Sure Med" is a trade name for the automated single-unit-dose medication dispensing system that records information relating to patients, physicians, physician orders, dates and times medications are withdrawn, and the names of licensed individuals withdrawing and administering dispensed medications.

FIRST CAUSE FOR DISCIPLINE

(Obtaining, Possessing, and Administering Controlled Substances in Violation of Law)

- 14. Respondent's registered nurse's license is subject to discipline under section 2761, subdivision (a) of the Code, for commission of the following acts of unprofessional conducted as defined under 2762, subdivision (a) of the Code:
- a. On multiple occasions from on or about December 9, 2002, until on or about January 20, 2003, while on duty as a licensed registered nurse at Los Alamitos Medical Center located in Los Alamitos, California, as more particularly described under paragraph 15 below, Respondent obtained multiple doses of Vicodin by fraud, deceit, misrepresentation, or subterfuge, in violation of Health and Safety Code section 11173, subdivision (a), by removing that substance from the facility's "Sure Med" medication dispensing system without authority or a physician's order to do so.
- b. On multiple occasions from on or about December 9, 2002, until on or about January 20, 2003, while on duty as a licensed registered nurse at Los Alamitos Medical Center located in Los Alamitos, California, as more particularly described under paragraph 15 below, Respondent possessed multiple doses of Vicodin, in violation of Health and Safety Code section 11350, by removing that substance from the facility's "Sure Med" medication dispensing system without authority or a physician's order to do so.

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c. On multiple occasions from on or about December 9, 2002, until on or about January 20, 2003, while on-duty as a licensed registered nurse at Los Alamitos Medical Center located in Los Angeles, California, as more particularly described under paragraph 15 below, Respondent administered Vicodin to multiple patients without authority or a physician's order to do so, in violation of Health and Safety Code section 11171; and,

d. On or about August 15, 2003, Respondent self-administered
Butalbital, without a prescription therefor, in violation of Health and Safety Code section 11171.

SECOND CAUSE FOR DISCIPLINE

(False, or Grossly Incorrect, Grossly Inconsistent, or Unintelligible Record Entries)

- 15. Respondent's registered nurse's license is subject to discipline under sections 2761, subdivision (a) of the Code, for commission of the following acts of unprofessional conducted as defined under 2762, subdivision (e) of the Code, in that while onduty as a licensed registered nurse at Los Alamitos Medical Center located in Los Alamitos, California, as more particularly set forth below, Respondent made false, grossly incorrect, grossly inconsistent, or unintelligible record entries in patient or other records pertaining to a controlled substance:
- a. Patient #445326: On or about December 9, 2002, at approximately 1200 hours, Respondent obtained one tablet of Vicodin for administration to Patient #445326, without a physician's order to do so. Thereafter, Respondent documented the unauthorized administration of the medication on the facility's Emergency Department Patient Care Record (EMDPCR) at approximately 1155 hours, a time of administration prior to the documented time that the medication had been obtained by Respondent.
- b. <u>Patient #482168</u>: On or about December 9, 2002, at approximately 1837 hours, Respondent obtained one tablet of Vicodin for administration to Patient #482168, without authority or a physician's order to do so. Thereafter, Respondent documented the unauthorized administration of the medication on the patient's medication

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27 28 administration record at approximately 1030 hours, a time of administration prior to the documented time that the medication had been obtained by Respondent.

- Patient #401219: On or about December 9, 2002, at C. approximately 0815 hours, Respondent obtained two tablets of Vicodin for administration to Patient #401219, without authority or a physician's order to do so. Thereafter, Respondent documented the unauthorized administration of the medication on the patient's medication administration record at approximately 0810 hours, a time of administration prior to the documented time that the medication had been obtained by Respondent.
- d. Patient #340639: On or about December 10, 2002, at approximately 1851 hours, Respondent obtained one tablet of Vicodin for administration to Patient #340639, without authority or a physician's order to do so. Thereafter, Respondent failed to document the unauthorized administration of the medication on the patient's medication administration record, or to otherwise account for the disposition of the medication.
- e. Patient #571751: On or about December 10, 2002, at approximately 1629 hours, Respondent obtained one tablet of Vicodin for administration to Patient #571751, without authority or a physician's order to do so. Thereafter, Respondent documented the unauthorized administration of the medication on the patient's medication administration record at approximately 1630 hours, a time of administration approximately oneminute after the documented time that the medication had been obtained by Respondent.
- f. Patient #497372: On or about December 14, 2002, at approximately 1604 hours, Respondent obtained one tablet of Vicodin for administration to Patient #497372, without authority or a physician's order to do so. Thereafter, Respondent documented the unauthorized administration of the medication on the patient's medication administration record at approximately 1435 hours, a time of administration prior to the time that the medication had been obtained by Respondent. Respondent also improperly documented on the facility's Emergency Department Patient Care Record (EMDPCR) the medication administration time "1435 hours," a time prior to the documented medication administration time entries made earlier that same day by other medical staff.

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g. Patient #631815: On or about December 16, 2002, at approximately 1639 hours, Respondent obtained one tablet of Vicodin for administration to Patient #631815, without authority or a physician's order to do so. Thereafter, Respondent documented the unauthorized administration of the medication on the patient's medication administration record at approximately 1615 hours, a time of administration prior to the documented time that the medication had been obtained by Respondent.

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h. Patient #614475: On or about January 2, 2003, at approximately 1006 hours, Respondent obtained one tablet of Vicodin for administration to Patient #614475, without authority or a physician's order to do so. Thereafter, Respondent documented the unauthorized administration of the medication on the patient's medication administration record at approximately 0950 hours, a time of administration prior to the documented time that the medication had been obtained by Respondent.

i. Patient #632784: On or about January 6, 2003, at approximately 1105 hours, Respondent obtained one tablet of Vicodin for administration to Patient #632784, without authority or a physician's order to do so. Thereafter, Respondent documented the unauthorized administration of the medication on the patient's medication administration record at 1045 hours, a time of administration prior to the documented time that the medication had been obtained by Respondent. Respondent also improperly noted the time of the patient's discharge from the facility on the facility's Emergency Department Patient Care Record (EMDPCR) as 1050 hours, January 6, 2003 when, in fact, the patient had actually been discharged from the facility at 1120 hours, January 6, 2003.

j. Patient #577862: On or about January 6, 2003, at approximately 1258 hours, Respondent obtained two tablets of Vicodin for administration to Patient #577862, without authority or a physician's order to do so. Thereafter, Respondent documented the unauthorized administration of the medication on the patient's medication administration record at approximately 1235 hours, a time of administration prior to the documented time that the medication had been obtained by Respondent.

k. Patient #606301: On or about January 6, 2003, at approximately 1623 hours, Respondent obtained one tablet of Vicodin for administration to Patient #606301, without authority or a physician's order to do so. Thereafter, Respondent documented the unauthorized administration of the medication on the patient's medication administration record at approximately 1600 hours, a time of administration prior to the documented time that the medication had been obtained by Respondent.

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l. Patient #345100: On or about January 11, 2003, at approximately 1839 hours, Respondent obtained one tablet of Vicodin for administration to Patient #345100, without authority or a physician's order to do so. Thereafter, Respondent documented the unauthorized administration of the medication on the patient's medication administration record, at approximately 1740 hours, a time of administration prior to the documented time that the medication had been obtained by Respondent.

m. Patient #633122: On or about January 13, 2003, at approximately 1241 hours, Respondent obtained one tablet of Vicodin for administration to Patient #633122, without authority or a physician's order to do so. Thereafter, Respondent documented the unauthorized administration of the medication on the patient's medication administration record at approximately 1220 hours, a time of administration prior to the documented time that the medication had been obtained by Respondent.

- n. Patient #558229: On or about January 13, 2003, at approximately 1439 hours, Respondent obtained two tablets of Vicodin for administration to Patient #558229, without authority or a physician's order to do so. Thereafter, Respondent documented the unauthorized administration of the medication on the patient's medication administration record at approximately 1410 hours, a time of administration prior to the documented time that the medication had been obtained by Respondent.
- o. <u>Patient #437640</u>: On or about January 13, 2003, at approximately 1728 hours, Respondent obtained one tablet of Vicodin for administration to Patient #437640, without authority or a physician's order to do so. Thereafter, Respondent documented the unauthorized administration of the medication on the patient's medication

administration record at approximately 1730 hours, a time of administration approximately two-minutes after the documented time that the medication had been obtained by Respondent.

- p. Patient #470367: On or about January 13, 2003, at approximately 1859 hours, Respondent obtained one Vicodin tablet for administration to Patient #470367, without authority or a physician's order to do so. Thereafter, Respondent failed to document the unauthorized administration of the medication on the patient's medication administration record, or to otherwise account for the disposition of the medication.
- Patient #485601: On or about January 20, 2003, at approximately 1245 hours, Respondent obtained one tablet of Vicodin for administration to Patient #485601, without authority or a physician's order to do so. Thereafter, Respondent documented the unauthorized administration of the medication on the patient's medication administration record at approximately 0830 hours, a time of administration prior to the documented time that the medication had been obtained by Respondent.

THIRD CAUSE FOR DISCIPLINE

(Gross Negligence)

16. Respondent's license is subject to discipline under section 2761, subdivision (a)(1) of the Code for acts of gross negligence, as more particularly set forth under paragraphs 15(a) through 15(q) above.

FOURTH CAUSE FOR DISCIPLINE

(Incompetence)

17. Respondent's license is subject to discipline under section 2761, subdivision (a)(1) of the Code for acts of incompetence, as more particularly set forth under paragraphs 15(a) through 15(q) above.

FIFTH CAUSE FOR DISCIPLINE

(Unprofessional Conduct)

18. Respondent's license is subject to discipline under section 2761, subdivision (a) of the Code for acts of unprofessional conduct, as more particularly set forth under paragraphs 15(a) through 15(q) above.

PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing the Board issue a decision:

- 1. Revoking or suspending Registered Nurse License Number 234178 issued to Julie Ann Messmer Predisik Stretz, also known as Julie A. Stretz;
- 2. Ordering Julie Ann Messmer Predisik Stretz, also known as Julie A. Stretz to pay the reasonable costs incurred by the Board in the investigation and enforcement of this case pursuant to section 125.3 of the Code; and,
 - 3. Taking such other and further action as deemed necessary and proper.

DATED: 2/24/05

RUTH ANN TERRY, M.P.H., R.N.

Executive Officer

Board of Registered Nursing

Department of Consumer Affairs

State of California Complainant

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